	CCS 2 Specifications CCS 2	2 Data Element Definitions			Rev. 0	2-21-2005 Page 1 of 15
No.	Data Element Name and Do	efinition	Data	Max.		Data Element Validation
		eminion	Type	Length		Description and Format
	Transaction Activity Code Designates whether the record Adds or Deletes in in the database. Default to A. If Delete, inform the		С	1		Add Delete
	Agency Code (CSB ID) The number, provided by the Department, that ide consumer and submitting consumer and service department.		С	3		IkpAGENCY Format: Leading zeros as appropriate
3	Program Area Code Indicates in which program area a consumer is rec Services Taxonomy 7 defines program area as the service activity for a defined population. The three services system are mental health, mental retarda services. Collected at the consumer's enrollment	e general classification of e program areas in the public tion, and substance abuse	С	3	200 300	Mental Health Mental Retardation Substance Abuse
4	CSB Admission Date The date on which the CSB accepts the consumer care. Admission is to the CSB, not to a program a Admission is defined in Core Services Taxonomy consumer's admission to the CSB.	rea or individual core service.	С	8	NA	Any valid date less than or equal to the date of service enrollment and CSB discharge date  Format: MMDDYYYY (No "", ', or /)
5	Service ID Code Each core service in which the consumer is enrolled at the CSB. Core services are defined in Core Services indicates the type of secollected and reported for that service. Collected a in the particular core service.	rvices Taxonomy 7, and the ervice unit that should be	С	3		IkpSERVICE
	Service Enrollment Date The date on which the consumer is enrolled in a seenrolled in every core service that he or she received an episode of care must be preceded by an admissis defined in Core Services Taxonomy 7. Collecte enrollment in the particular core service.	ves, and the first enrollment in sion to the CSB. Enrollment	С	8	NA	Any valid date greater than or equal to the date of CSB admission and less than or equal to the service release date for the particular core service  Format: MMDDYYYY (No "", ', or /)
7	Consumer ID (CSB Level Unique ID)  A number or a combination of numerical and alpha identify the consumer uniquely within the CSB. If a same CSB after discharge for another episode of consumer ID should be used again. Assigned and admission to the CSB.	a consumer returns to the care, his or her same	С	10		Up to 10 numerals or a combination of up to 10 numerical and alphabetical characters

	CCS 2 Specifications	CCS 2 Data Element Def	inition	s	Rev.	02-21-2005 Page 2 of 15
No.	Data Element Name ar	nd Definition	Data	Max.		Data Element Validation
NO.	Data Lienient Name at	id Deliliition	Type	Length	Code	Description and Format
	Statewide Unique Consumer ID (SSN) The social security number of the consumer the algorithm field at export and identifies the consumervices system. The consumer can be tracked from a CSB to a state facility through multiple and discharges. Collected at the consumer's a	sumer uniquely across the entire ed from one CSB to another and admissions, enrollments, releases,	С	9	NA	Format: Numbers only, no separations or dashes; leading zeros as appropriate
	Service Release Date The date on which the consumer is released f be released from every core service received he or she can be discharged from the CSB. R Taxonomy 7. Collected at the consumer's rele	during an episode of care before Release is defined in Core Services	С	8	NA	Any valid date greater than or equal to the CSB admission date and service enrollment date and less than or equal to CSB discharge date Format: MMDDYYYY (No " ", ', or /)
	Units of Service The total number of units of service provided to Provider Service Hours, Day Support Hours,	Days of Service, and Bed Days ce are defined in Core Services a list of core services codes and ce received by the consumer are for prevention are collected only	С	10	NA	Fractions of units should be used only for core services codes with a unit type of Hours.  Format: Include a decimal to specify fractions of units for services with an Hour unit of service type
	CSB Discharge Date The date on which the CSB discharges the co Discharge is from the CSB, not from a prograr (which is a service release). Discharge is defi Collected at the consumer's discharge from th Error Type: Fatal Exception for Discharge Re	m area or individual core service ned in Core Services Taxonomy 7. le CSB.	С	8	NA	A valid date greater than the CSB admission date and last service release date but less than or equal to the current date  Format: MMDDYYYY (No "", ', or /)
	CSB Discharge Status Code The status of the consumer at the time of disc Collected at the consumer's discharge from th  Error Type: Fatal Exception for Discharge Re Format: Leading zeros as appropriate	e CSB.	С	2	01 02 03	Discharged – Evaluation or Assessment: Consumer was admitted for evaluation or assessment purposes only Discharged - Treatment Completed: Consumer successfully completed the planned treatment Discharged - Treatment Not Completed: Administratively discontinued, CSB lost contact with consumer, case closed after predetermined period of time

	CCS 2 Specifications	CCS 2 Data Element Definitions			Rev. 02	v. 02-21-2005 Page 3 of 15		
No.	Data Fleme	ent Name and Definition	Data	Max.		Data Element Validation		
			Type	Length			ption and Format	
12	CSB Discharge Status Code	(continued) ne time of discharge from the episode of				Discharged - Tr Consumer died	reatment not Completed:	
	care. Collected at the consume						eatment not Completed:	
	care. Conceted at the consume	13 discharge from the GGB.			03		inated due to non-	
	Error Type: Fatal Exception for	Discharge Record					eaking program rules)	
	Format: Leading zeros as appli						reatment not Completed:	
	3 11	•	С	2			inated services against	
	NOTE: For all data elements w	here 97 and 98 are code choices, use 97		_		the advice of st		
		to collect the information and the				Discharge – Otl		
		ow or could not provide the information.			08	Incarcerated -	Terminated due to	
		as made to collect the information. This				incarceration		
	also applies to codes 997 and 9	9997 and 998 and 99998.				Unknown		
						Not Collected		
13a	SMI/SED/At-Risk of SED					None		
		erious Mental Illness (SMI) or Serious				Serious Mental		
		r is At-Risk of Serious Emotional	С	2			nal Disturbance (SED)	
		-Risk of SED are defined in Core Services				At-Risk of SED Unknown		
	whenever it changes or at least	onsumer's admission to the CSB and				Not Collected		
13h	Cognitive Delay	annuany.				None		
100	, ,	less than six years old and has a confirmed			_	Cognitive Delay	,	
		within one year of assessment, but does not	С	2		Unknown		
		osis. Defined in more detail in Core		_	_	Not Collected		
		d at the consumer's admission to the CSB.						
14	City or County Residence Cod							
		that identifies the county or city in which the	С	3	See	IkpFIPS		
		the consumer's admission to the CSB.						
15	Referral Source Code					Self		
		ation that referred the consumer to the CSB				Family or Friend		
		lected at the consumer's admission to the				MR Care Provid		
	CSB.		С	2			or Educational Authority nployee Assistance Prog.	
				~		ASAP or DUI P		
						Police or Sherif		
	Format: Leading zeros as app	ropriate				Local Correction		
		- F				State Correction	•	

	CCS 2 Specifications	CCS 2 Data Element Definition	ns		Re	v. 02-21-2005	Page 4 of 15
No.	Data Fle	ment Name and Definition	Data	Max.		Data Elemen	
			Type	Length		•	on and Format
15	for evaluation or treatment. (CSB.  * Code referrals from the Hira Center for Behavioral Reha	inued) nization that referred the consumer to the CSB Collected at the consumer's admission to the  am Davis Medical Center and the Virginia bilitation as State Hospital (Code 21).  The new admissions, use either code 29 or 30.	С	2	14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 97	Probation Office Parole Office Other Community Private Hospital Private Physician Private MH Outpa State MH Outpation State Hospital (MH State Training Cer Non-Hospital SA C Court Department of Soc Health Department Other Virginia CSI	tient Practitioner ent Practitioner H Facility) * Inter (MR Facility) Care Provider It Services (DSS)** It Shabilitative Services
16	Date of Birth The consumer's date of birth	collected at consumer's admission to the CSB.	С	8			or to admission date YYY (No " ", ', or /)
17	Gender Code	ected at the consumer's admission to the CSB.	С	2	97	Female Male Unknown Not Collected	·
18	Race Code The consumer's race, as identify one of the following rand Budget in the 2000 cens Black or African American, Nor Other. Alternately, consurcodes, designated with a ** in consumer. Collected at the concluded for historical purpos	ntified by the consumer. Consumers can self- aces, used by the federal Office of Managemen us: American Indian or Alaska Native, Asian, ative Hawaiian or Other Pacific Islander, White, ners can choose one of the new multi-race on the Code table. Enter only one code for a consumer's admission to the CSB. * Code 03 is es only; it should not be used for admissions of Format: Leading zeros as appropriate.	С	2	02 03 04 05 06 13 23 31		

	CCS 2 Specifications CCS 2 Data Element Definition	าร		Rev.	02-21-2005 Page 5 of 15
No.	Data Element Name and Definition	Data			Data Element Validation
		Type	Length		Description and Format
	Race Code (continued) Consumers can self-identify one of these races: American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, White, or Other. Alternately, consumers can choose one of the new multi-race codes, designated with a ** in the Code table. Enter only one code for a consumer. Collected at the consumer's admission to the CSB. Hispanic Origin (data element 19) is not a valid race code; it is an ethnicity.  Hispanic Origin Code Indicates if the consumer is of Hispanic Origin, as defined by the U.S. Census (2000), a person of Spanish origin or descent, regardless of race. Collected at the consumer's admission to the CSB.		2	33 34 35 97 98 01 02 03 04 05	Asian and White ** Black or African American and White ** American Indian or Alaska Native and Black or African American ** Other Multi-Race ** Unknown Not Collected Puerto Rican Mexican Cuban Other Hispanic Not of Hispanic Origin
	Format: Leading zeros as appropriate.			97	Hispanic – Specific Origin not identified Unknown Not Collected
20	Co-Dependent or Collateral Status  A person who has no substance use disorder, but who satisfies all of the following conditions: 1) is seeking services due to problems arising from his or her relationship with a person with a substance use disorder, 2) has been admitted to the CSB and enrolled in a service, and 3) has his or her own record within a primary consumer's individualized services plan. Collected at the person's admission to the CSB.	С	1	N U	Yes No Unknown Not Collected
21	Education Level Code The consumer's level of education; specifies the highest school grade or college year completed. Collected at the consumer's admission to the CSB, whenever the education level changes or at least annually, and at the consumer's discharge from the CSB.  There is no separate code for special education. Consumers who are in special education or who have graduated from special education should have the applicable highest school grade completed (e.g., 03, 04, 05, 06, or 07) entered.  Format: Leading zeros as appropriate.	С	2	03 04 05 06 07 08 09	Never Attended School Preschool or Kindergarten Some Elementary School (Grades 1-7) Completed Elementary School (Grade 8) Some High School or Vocational Education (Grades 9-11) Completed High School or Vocational Education (Grade 12 or High School Equivalent - GED) Some College Completed College (Undergraduate or higher degree) Unknown Not Collected

	CCS 2 Specifications	CCS 2 Data Element Definition	S		Rev.	02-21-2005	Page 6 of 15
No.	Data Fle	ement Name and Definition	Data				ment Validation
			Type	Length			ription and Format
22			С	2	01 02 03 06 07 08 09 10 11 12 13	Employed Ful more; included Employed Par Unemployed: at time of adm Not in Labor For Included Project In Labor For Included Project Included P	I Time (35 hours a week or s Armed Forces) It Time (<35 hours/week) Consumer is unemployed hission but is seeking work force: Homemaker force: Student or in Job fram force: Disabled force: Disabled force: Resident or Inmate on force - Other: Unemployed ing Employment Program: Include persons or supported employment force: Persons in sheltered
23			С	2	01 02 03 04 05 06 07 08 09 10 11 12 13 14 97	Shelter Boarding Hom Foster Home Licensed Assi non-CSB ope Community (C Residential Tr Rehabilitation Nursing Home Hospital Local Jail or C State Correcti Other Institution	or Family Sponsor Home sted Living Facility (CSB or rated) CSB) Residential Service reatment or Alcohol or Drug (Other Residential Setting) or Physical Rehabilitation Correctional Facility onal Facility onal Setting ress or Homeless Shelter) intion Center

	CCS 2 Specifications CCS 2 Data Element Definition	ıs		Rev. (	02-21-2005 Page 7 of 15
No.	Data Element Name and Definition	Data	Max.		Data Element Validation
140.	Data Liement Name and Demitton	Type	Length	Code	Description and Format
24	Legal Status Code				Voluntary: Consumer seeks admission
	The consumer's legal status in relation to the receipt of services. Collected				to services voluntarily
	at the consumer's admission to and discharge from the CSB. Legal status at				Involuntary Civil: Consumer is admitted
	admission is maintained as an historical field.				to services involuntarily for a non-
					criminal proceeding, whether for
					purposes of examination and
				0.4	observation or for treatment
					Involuntary Juvenile Court:
					Guardianship remains with the parent, child remains in the community and is
					court-ordered for treatment
				06	Involuntary Criminal (ordered): A
					person under criminal charges or
					convictions pending for purposes of
					treatment or evaluation
				07	Involuntary Criminal (ordered): A
					person under criminal charges and
					incompetent to stand trial
		С	2	80	Involuntary Criminal (ordered): A
					person under criminal charges who has
					been adjudicated not guilty by reason of
					insanity (NGRI)
				09	Involuntary Criminal (ordered): A
					person under criminal charges with a
	Format, Looding ware as annuantiate				determination of sexual psychopathy
	Format: Leading zeros as appropriate.				and related legal categories
					Involuntary Criminal (ordered): A person under criminal charges who is
					transferred from a correctional facility
				11	Treatment Ordered: Conditional
					release (NGRI)
					Treatment Ordered: Condition of
					diversion
				13	Treatment Ordered: Condition of
					probation
				14	Treatment Ordered: Condition of Parole
					Unknown
				98	Not Collected

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No.	Data Element Name and Definition	Data	Max.		Data Element Validation
NO.	Data Element Name and Definition	Type	Length	Code	Description and Format
25	Number of Prior Episodes in any Drug or Alcohol Programs The number of previous episodes of care in which the consumer has received any substance abuse services, regardless of the setting (e.g., hospital, community, another state). The number reflects complete episodes of care. For a CSB, this means the number of admissions with discharges; it does not indicate the number of services in which the consumer has been enrolled. Collected at the consumer's admission to the CSB. Core Services Taxonomy 7 defines episode of care.		2	01 02 03 04 05 97	None One Episode Two Episodes Three Episodes Four Episodes Five or More Episodes Unknown Not Collected
26	Format: Leading zeros as appropriate.  Diagnosis: Axis I Code  The DSM IV Axis I diagnosis determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes.	С	5	99997	Any DSM IV valid diagnosis code for Axis I without the decimal point Unknown Not Collected
27	Diagnosis: Axis I Code The DSM IV Axis I diagnosis determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes.  Multiple Axis I diagnoses can be collected here and in elements 52 - 55.	С	5	99997	Any DSM IV valid diagnosis code for Axis I without the decimal point Unknown Not Collected
28	Diagnosis: Axis II Code The DSM IV Axis II diagnosis determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes.	С	5	99997	Any DSM IV valid diagnosis code for Axis II without the decimal point Unknown Not Collected
29	Diagnosis: Axis II Code The DSM IV Axis II diagnosis determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes.	С	5	99997	Any DSM IV valid diagnosis code for Axis II without the decimal point Unknown Not Collected
	Diagnosis: Axis III Code The DSM IV Axis III diagnosis determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes.	С	1	U	Yes No Unknown Not Collected
31	Diagnosis: Axis V - Current GAF Code Three-digit DSM IV Axis V diagnosis (current Global Assessment of Functioning code) determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes.  Format: Leading zeros as appropriate from 000 to 100.		3	997	Valid DSM IV MH level of disability GAF code Unknown Not Collected

No.   Data Element Name and Definition   Data Type   Code   Data Element Validation   Type   Code   Description and Format		CCS 2 Specifications CCS 2 Data Element Defi	nitions		Re	ev. 02-21-2005	Page 9 of 15
32 SA Primary Drug: Type of Drug Code The consumer's primary substance use disorder problem (drug of abuse). Collected at the consumer's enrollment in and release from each core service.  8 A Primary Drug: Type of Drug Code The consumer's primary substance use disorder problem (drug of abuse). Collected at the consumer's enrollment in and release from each core service.  9 A Marijuana or Hashish - Including THC and other cannabis sativa preparations Heroin Non-prescription Methadone Or Other Opiates or Synthetics - Including codeine, Dilaudid, morphine, Demerol, opium and any other drug with morphine-like effects PCP- Phencyclidine Other Hallucinogens - Including LSD, DMT, STP, mescaline, psilocybin, peyote, etc. Methamphetamines Other Hallucinogens - Including Benzadrine, Dexedrine, Preludin, Ritalin, and any other " amines" and related drugs Other Stimulants Benzodiazepine - Including Diazepam, Flurazepam, Chlordiazepoxide, Chlorazepate Lorazepam, Alprazolam, Oxazepam, Temazepam, Prazepam, Triazolam Other Tranquilizers Barbiturates - Including Phenobarbital, Seconal, Nembudal, etc. Other Sedatives or Hypnotics - Including chloralhydrate. Placidyl, Doriden, memproma' Inhalants - Including ether, glue, chloroform, nitrous oxide, gasoline, paint thinner, etc. Over-the-Counter - Including appirin, cough syrup, Sominex, over-the-counter diet aids	No	Data Flement Name and Definition					
The consumer's primary substance use disorder problem (drug of abuse). Collected at the consumer's enrollment in and release from each core service.    Cocaine or Crack Cocaine			Type	Length			tion and Format
(e.g., Dexatrim), and any other legally-obtained, non-prescription medication  20 Other		SA Primary Drug: Type of Drug Code The consumer's primary substance use disorder problem (drug of abuse). Collected at the consumer's enrollment in and release from each core service.	Type	Length	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18	None Alcohol Cocaine or Crack O Marijuana or Hashi other cannabis sati Heroin Non-prescription M Other Opiates or S codeine, Dilaudid, r and any other drug PCP- Phencyclidine Other Hallucinogen STP, mescaline, ps Methamphetamines Other Amphetamin Dexedrine, Preludir amines" and related Other Stimulants Benzodiazepine - In Flurazepam, Chlora Lorazepam, Alpraz Temazepam, Praze Other Tranquilizers Barbiturates - Inclu Seconal, Nembutal Other Sedatives or chloralhydrate. Plac Inhalants - Includin nitrous oxide, gaso Over-the-Counter - syrup, Sominex, ov (e.g., Dexatrim), an obtained, non-prese	Cocaine sh - Including THC and va preparations  lethadone ynthetics - Including morphine, Demerol, opium, with morphine-like effects e as - Including LSD, DMT, silocybin, peyote, etc. s es - Including Benzadrine, n, Ritalin, and any other " d drugs  ncluding Diazepam, diazepoxide, Chlorazepate, olam, Oxazepam, epam, Triazolam s ding Phenobarbital, l, etc. Hypnotics - Including cidyl, Doriden, mempromate g ether, glue, chloroform, line, paint thinner, etc. Including aspirin, cough ver-the-counter diet aids and any other legally-

	CCS 2 Specifications CCS 2 Data Element Definitio	าร		Rev. (	02-21-2005 Page 10 of 15
No.	Data Element Name and Definition	Data	Max.		Data Element Validation
140.	Data Liement Name and Demittion	Type	Length	Code	Description and Format
33	SA Primary Drug: Frequency of Use Code The consumer's frequency of use for the primary drug of abuse. Collected a the consumer's enrollment in and release from each core service.				No use in the past month; consumer has not used any drug in past month or is not currently a user but is seeking service to avoid relapse
	Format: Leading zeros as appropriate.	С	2	03 04	One to three times in the past month One to two times per week Three to six times per week
	<b>Validation:</b> If SA Primary Drug Type is equal to "01" (None), this field may contain "98" (Not Collected). If SA Primary Drug Type is equal to "96" (Not Applicable), then this field must contain "98" (Not Collected).			97 98	Daily Unknown Not Collected
34	SA Primary Drug: Method of Use Code/Usual Route of Administration The consumer's method of use or usual route of administration for the primary drug of abuse. Collected at the consumer's enrollment in and release from each core service. Format: Leading zeros as appropriate. Validation: If SA Primary Drug Type is equal to "01" (None), this field may contain "98" (Not Collected). If SA Primary Drug Type is equal to "96" (Not Applicable), then this field must contain "98" (Not Collected).	С	2	02 03 04 05 97	Oral Smoking Inhalation Injection (IV or Intramuscular) Other Unknown Not Collected
35	SA Primary Drug: Age at First Use Code The age at which the consumer first used the primary drug of abuse. Collected at the consumer's enrollment in and release from each core service. For alcohol, this field records the age of the consumer's first intoxication. Format: Leading zeros as appropriate.	С	2	01-96 97	Newborn Actual age at first use Unknown Not Collected
36	SA Secondary Drug: Type of Drug Code The consumer's secondary substance use disorder problem (drug of abuse). Collected at the consumer's enrollment in and release from each core service.  Format: Leading zeros as appropriate.	С	2	02 03 04 05 06 07	None Alcohol Cocaine or Crack Cocaine Marijuana or Hashish - Including THC and other cannabis sativa preparations Heroin Non-prescription Methadone Other Opiates or Synthetics - Including codeine, Dilaudid, morphine, Demerol, opium, and any other drug with morphine-like effects PCP - Phencyclidine Other Hallucinogens - Including LSD, DMT, STP, mescaline, psilocybin, peyote, etc.

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No.	Data Element Name and Definition	Data	Max.	Data Element Validation		
140.		Type	Length	Code		ion and Format
36	SA Secondary Drug: Type of Drug Code (continued) The consumer's secondary substance use disorder problem (drug of abuse). Collected at the consumer's enrollment in and release from each core service.			10 11		s - Including Benzadrine, Ritalin, and any other "
				12 13	Other Stimulants Benzodiazepine - Inc Flurazepam, Chlordia Lorazepam, Alprazol Temazepam, Prazep Other Tranquilizers	cluding Diazepam, azepoxide, Chlorazepate, am, Oxazepam, am, Triazolam
	Format: Leading zeros as appropriate.	С	2	15 16 17 18	Nembutal, etc. Other Sedatives or Hohoralhydrate. Placid Inhalants - Including nitrous oxide, gasolir Over-the-Counter - In	dyl, Doriden, mempromate ether, glue, chloroform, ne, paint thinner, etc. ncluding aspirin, cough
	Validation: Note: If Program ID code = 300, this data element is required. If the Co-Dependent or Collateral Status field (data element 20) is equal to "Y", this field may contain "96." If the Co-Dependent or Collateral Status field is equal to "N", this field may not contain a "96."			20 96 97 98		r-the-counter diet aids (e.g., ther legally-obtained, non- on
37	SA Secondary Drug: Frequency of Use Code The consumer's frequency of use for the secondary drug of abuse. Collected at the consumer's enrollment in and release from each core service.  Format: Leading zeros as appropriate. Validation: If SA Secondary Drug Type is equal to "01" (None), this field may contain "98" (Not Collected). If SA Secondary Drug Type is equal to "96" (Not Applicable), then this field must contain "98" (Not Collected).	С	2	01 02 03 04 05 97 98	No use in the past mused any drug in pas	week

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No.	Data Element Name and Definition	Data	Max.		Data Element Validation		
140.		Type	Length	Code	Descript	ion and Format	
38	SA Secondary Drug: Method of Use Code/Usual Route of Administration  The consumer's method of use or usual route of administration for the secondary drug of abuse. Collected at the consumer's enrollment in and release from each core service.  Format: Leading zeros as appropriate.  Validation: If SA Secondary Drug Type is equal to "01" (None), this field may contain "98" (Not Collected). If SA Secondary Drug Type is equal to "96" (NA), then this field must contain "98" (Not Collected).	С	2	01 02 03 04 05 97 98	Oral Smoking Inhalation Injection (IV or Intran Other Unknown Not Collected	nuscular)	
39	SA Secondary Drug: Age at First Use Code The age at which the consumer first used the secondary drug of abuse. Collected at the consumer's enrollment in and release from each core service. For alcohol, this field records the age of the consumer's first intoxication. Format: Leading zeros as appropriate.	С	2	01-96 97 98	Newborn Actual age at first use Unknown Not Collected	е	
40	SA Tertiary Drug: Type of Drug Code The consumer's tertiary substance use disorder problem (drug of abuse). Collected at the consumer's enrollment in and release from each core service.  Format: Leading zeros as appropriate.	С	2	03 04 05 06 07 08 09 10 11	cannabis sativa prep Heroin Non-prescription Met Other Opiates or Syr Dilaudid, morphine, I other drug with morp PCP- Phencyclidine Other Hallucinogens STP, mescaline, psile Methamphetamines Other Amphetamines Dexedrine, Preludin, amines" and related Other Stimulants Benzodiazepine - Inc	n -Including THC and other arations  thadone athetics - Including codeine, Demerol, opium, and any hine-like effects  - Including LSD, DMT, ocybin, peyote, etc. s - Including Benzadrine, Ritalin, and any other " drugs cluding Diazepam, azepoxide, Chlorazepate, am, Oxazepam,	

	CCS 2 Specifications CCS 2 Data Element Definitions				Rev. 02-21-2005	Page 13 of 15		
No.			Data				ent Validation	
			Туре	Length			ion and Format	
40	SA Tertiary Drug: Type of D				15		ng Phenobarbital, Seconal,	
	The consumer's tertiary substance use disorder problem (drug of abuse). Collected at the consumer's enrollment in and release from each core service.				16	Nembutal, etc.	vanation landuding	
					10	Other Sedatives or Hypnotics - Including chloralhydrate. Placidyl, Doriden, mempromate		
	each core service.				17		ether, glue, chloroform,	
					''	nitrous oxide, gasolin		
					18		ncluding aspirin, cough	
	Format: Leading zeros as ap	propriate.	С	2			r-the-counter diet aids (e.g.,	
		' '					ther legally-obtained, non-	
						prescription medication		
		ID code = 300, this data element is			20	Other		
		t or Collateral Status field (data element			96	Not Applicable		
		ay contain "96." If the Co-Dependent or			97	Unknown		
4.4		to "N", this field may not contain a "96".			98	Not Collected		
41	SA Tertiary Drug: Frequenc				01		onth; consumer has not	
		use for the tertiary drug of abuse.  nrollment in and release from each core					t month or is not currently a ervice to avoid relapse	
	service.	monnent in and release nom each core			02	One to three times in		
	Service.		С	2	03	One to two times per		
	Format: Leading zeros as ap	propriate.		_	04	Three to six times pe		
		ig Type is equal to "01" (None), this field			05	Daily		
	may contain "98" (Not Collecte	ed). If SA Tertiary Drug Type is equal to			97	Unknown		
		s field must contain "98" (Not Collected).			98	Not Collected		
42	SA Tertiary Drug: Method o	f Use Code/Usual Route of						
	Administration				01	Oral		
		e or usual route of administration for the			02	Smoking		
	release from each core service	ted at the consumer's enrollment in and	С	2	03 04	Inhalation	augaular)	
	Format: Leading zeros as ap				05	Injection (IV or Intran Other	iusculai)	
		ig Type is equal to "01" (None), this field			97	Unknown		
		ed). If SA Tertiary Drug Type is equal to			98	Not Collected		
	"96" (NA), then this field must							
43	SA Tertiary Drug: Age at Fir	· · · · · · · · · · · · · · · · · · ·			00	Newborn		
	The age at which the consume	er first used the tertiary drug of abuse.			01-96	Actual age at first use	e	
		nrollment in and release from each core	С	2	97	Unknown		
		records the age of the consumer's first			98	Not Collected		
	intoxication. Format: Leadin	ig zeros as appropriate.						

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No.	Data Element Name and Definition		Data	Max.	Data Element Validation		
			Туре	Length			ription and Format
44	Consumer Pregnant Status Indicates if the consumer is a female with a substance use disorder who is pregnant. Collected at the consumer's admission to the CSB.		С	1	N U	U Unknown	
45	Female with Dependent Children Status Indicates if the consumer is a female with a substance use disorder who is living with dependent children (ages birth through 17). Collected at the consumer's admission to the CSB and maintained as an historical field.		С	1	Y N U	Yes No Unknown Not Collected	
	Days Waiting to Enter Treat The number of calendar days the first scheduled appointme consumer's admission to the minimum, this must be collect disorders. Format: Leading	ment from the first contact or request for service untilent accepted by the consumer. Collected at the CSB for the substance abuse program area. At a ted for pregnant females with substance use	С	3	996 997	Number of da (example: on Unknown Not Collected	e day = 001)
47	consumer's enrollment in and the mental health and substa	rrests in the past six months. Collected at the I release from each core service for consumers in nce abuse program areas. This provides an nvolvement with the criminal justice system.	С	2	97	Number of ar Unknown Not Collected	
48	Service Date	ice units are being accumulated and extracted on	С	4			which starts on July 1 of lends on June 30 of the r
49	adopted by the State Board, the disclosure of information, treat participation in human resear make these decisions. Legal A guardian is defined in section appointed by the court who is incapacitated person, including the person's support, care, he therapeutic treatment, and, if admission, residence. Guard Information is collected at the	entative Status cluding the current Human Rights Regulations to give informed consent or authorization for atment, including medical treatment, and ch for an individual who lacks the capacity to ly authorized representatives include guardians. on 37.2-1000 of the Code of Virginia as a person a responsible for the personal affairs of an ang responsibility for making decisions regarding ealth, safety, habilitation, education, and not inconsistent with an order of involuntary lians include limited and temporary guardians. e consumer's admission to and discharge from the d mental retardation program areas.	С	1	N U	Yes No Unknown Not Collected	

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No.	Data Element Name and Definition		Max.		Data Element Validation	
NO.			Length	Code	Description and Format	
50	Medicaid Status The consumer was enrolled in Medicaid at any point during the current fiscal year. Each month the extraction logic looks back over the whole year and picks up a Yes at any time during the fiscal year.		1	ΥN	Yes No Default to N, since U and X are not used.	
51	Date of Last Direct SA Service Indicates the last date of substance abuse direct service received by or provided to the consumer in an episode of care. See Core Services Taxonomy 7 for descriptions of valid direct consumer services.		8	NA	Format: MMDDYYYY (No " ", ', or /)	
52	Diagnosis: Axis I Code The DSM IV Axis I diagnosis determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes. Multiple Axis I diagnoses can be collected in elements 52 - 55.	С	5	99997	Any DSM IV valid diagnosis code for Axis I without the decimal point Unknown Not Collected	
53	Diagnosis: Axis I Code The DSM IV Axis I diagnosis determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes.	С	5	99997	Any DSM IV valid diagnosis code for Axis I without the decimal point Unknown Not Collected	
54	Diagnosis: Axis I Code The DSM IV Axis I diagnosis determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes.	С	5	99997	Any DSM IV valid diagnosis code for Axis I without the decimal point Unknown Not Collected	
55	Diagnosis: Axis I Code The DSM IV Axis I diagnosis determined by clinical or direct care staff qualified to make such assessments. Collected at the consumer's admission to and discharge from the CSB and whenever the diagnosis changes.	С	5	99997	Any DSM IV valid diagnosis code for Axis I without the decimal point Unknown Not Collected	
56	Units of Service: Consumer Service Hours Only Used to capture consumer service hours, added in Core Services Taxonomy 7. Consumer service hours must be collected for Emergency, Outpatient, Opioid Detoxification, Opioid Treatment, Substance Abuse Motivational Treatment, and Consumer Monitoring Services. Consumer service hours also can be collected for any other service for which the unit of service is a service hour except for Prevention Services. Do not collect or report consumer service hours for any core services for which the unit of service is a bed day, day of service, or day support hour. Do not collect for Prevention Services, since consumers are not counted for this service. See Core Services Taxonomy 7 for a complete definition of consumer service hour and for more information.	С	10		Format: Include a decimal to specify fractions of consumer service hours.	